



GP 11632

Atty. Dkt. No. 023533-0113

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Lawrence E. CORNETT et al.

Title: RECOMBINANT BETA2-
ADRENERGIC RECEPTOR
DELIVERY AND USE IN
TREATING AIRWAY AND
VASCULAR DISEASES

RECEIVED

NOV 12 2002

TECH CENTER 1600/2900

Appl. No.: 09/783,580

Filing Date: 02/15/2001

Examiner: Scott David Priebe

Art Unit: 1632

AMENDMENT TRANSMITTALCommissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.

[] Small Entity statement is enclosed.

[X] The fee required for additional claims is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	—	43	= 6	x \$18.00	= \$108.00
Independents:	5	5	= 0	x \$84.00	= \$0.00
First presentation of any Multiple Dependent Claims:			+ \$280.00	=	\$0.00
CLAIMS FEE TOTAL:					= \$0.00

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$0.00
<input checked="" type="checkbox"/>	Extension for response filed within the second month:	\$400.00	\$400.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$920.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,440.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,960.00	\$0.00
EXTENSION FEE TOTAL:			\$400.00
CLAIMS AND EXTENSION FEE TOTAL:			\$508.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):		\$254.00
<input checked="" type="checkbox"/>	Information Disclosure Statement Fee	\$180.00 1	\$180.00
TOTAL FEE:			\$434.00

- ☒ Please charge Deposit Account No. 19-0741 in the amount of \$434.00. A duplicate copy of this transmittal is enclosed.
- ☐ A check in the amount of \$_____ is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

November 7, 2002

By

Jayme A. Huleatt

FOLEY & LARDNER

Customer Number: 22428



22428

PATENT TRADEMARK OFFICE

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Jayme A. Huleatt
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